

COMBINED DECLARATION AND POWER OF ATTORNEY
IN ORIGINAL APPLICATION

As the below named sole inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name;

I believe that I am the original, first and sole inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

APPARATUS AND METHOD FOR IMPRESSING PATTERNS IN A SLIP-FORMED
CONCRETE WALL

the specification of which is attached hereto.

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, Section 1.56(a).

No foreign priority benefits under Title 35, United States Code, Section 119 are claimed.

As a named inventor, I hereby appoint R. Michael West, Registration No. 29599, and Jeffrey B. Slaton, Registration No. 48617 of the firm of Boutin, Dentino, Gibson, Di Giusto, Hodell & West, as my attorneys to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith.

Address all telephone calls or facsimile transmissions to R. MICHAEL WEST, ESQ. at Telephone No. (916) 321-4444 or Facsimile No. (916) 321-4425.

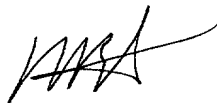
Correspondence address: R. Michael West
Boutin, Dentino, Gibson, Di Giusto, Hodell & West
455 Capitol Mall, Suite 300
Sacramento, California 95814

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of

Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of inventor: Michael B. Allen

Inventor's Signature:



Dated:

July 25, 2001

Residence Address:

3056 Canal Drive, Stockton, California 95204

Citizenship:

United States

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